## Case 22-00297-hb Doc 15 Filed 03/03/22 Entered 03/03/22 14:46:06 Desc Main Document Page 1 of 48

Fill in this info	rmation to identify your	case:			
Debtor 1	Carole Haire Cole	eman			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	DISTRICT OF SOUTH	CAROLINA		
Case number	22-00297				
(if known)					Check if this is an
					amended filing

### Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Par	t 1: Summarize Your Assets		
		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	235,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	33,080.0
	1c. Copy line 63, Total of all property on Schedule A/B	\$	268,080.0
ar	t 2: Summarize Your Liabilities		
			<b>abilities</b> t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	254,558.70
	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.0
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	13,171.0
	Your total liabilities	\$	267,729.76
<sup>o</sup> ar	t 3: Summarize Your Income and Expenses		
١.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	3,431.2
<b>5</b> .	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	1,770.0
<sup>o</sup> ar	t 4: Answer These Questions for Administrative and Statistical Records		
<b>3</b> .	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other scl	nedules.
7.	■ Yes What kind of debt do you have?		

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 1 Carole Haire Coleman Case number (if known) 22-00297

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$ 2,545.96

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

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			Document	Page 3 of 48			
Fill in this information	on to identify your	case and this	s filing:				
_	Carole Haire Cole	-					
F Debtor 2	irst Name	Middle N	lame	Last Name			
	irst Name	Middle N	lame	Last Name			
Jnited States Bankru	ptcy Court for the:	DISTRICT O	F SOUTH CAROLI	NA			
Case number 22-0	0297			_			☐ Check if this is a amended filling
ink it fits best. Be as	A/B: Prop ately list and describe complete and accurat ace is needed, attach	e items. List ar te as possible.	. If two married peopl	an asset fits in more than one le are filing together, both are he top of any additional pages,	equally respo	onsible for su	pplying correct
art 1: Describe Each	Residence, Building	, Land, or Othe	er Real Estate You Ov	wn or Have an Interest In			
Do you own or have  ☐ No. Go to Part 2.  ☐ Yes. Where is the		e interest in an	y residence, buildinç	g, land, or similar property?			
No. Go to Part 2. Yes. Where is the  211 Ole Simps	property?	e interest in an	What is the propert ■ Single-family □ Duplex or mu	<b>ty?</b> Check all that apply	the amount	of any secured	ims or exemptions. Put d claims on Schedule D: ns Secured by Property.
No. Go to Part 2. Yes. Where is the  211 Ole Simps	property?  son Place ilable, or other description  SC 297	e interest in an	What is the propert  ■ Single-family  □ Duplex or mu  □ Condominium	ty? Check all that apply home  Ilti-unit building n or cooperative d or mobile home	the amount Creditors W  Current valuentire prope	of any secured Tho Have Clain ue of the	d claims on Schedule D: ns Secured by Property.  Current value of the portion you own?
No. Go to Part 2.  Yes. Where is the  211 Ole Simpore Street address, if available Catawba	property?  son Place ilable, or other description  SC 297	04-0000	What is the propert  Single-family  Duplex or mu  Condominium  Manufactured  Land  Investment pr  Timeshare  Other	ty? Check all that apply home ulti-unit building n or cooperative d or mobile home roperty	Current valentire properties the such as feed to such as feed	of any secured the Have Claim ue of the erty?  5,000.00  The nature of yellow is simple, tenses, if known.	Current value of the portion you own? \$235,000.0  Secured by Property.
No. Go to Part 2.  Yes. Where is the  211 Ole Simpore Street address, if available Catawba	property?  son Place ilable, or other description  SC 297	04-0000	What is the propert  Single-family Duplex or mu Condominium Manufactured Land Investment pr Timeshare Other Who has an interes	ty? Check all that apply home ulti-unit building n or cooperative d or mobile home roperty	Current valentire prop \$23  Describe th (such as fea a life estate	of any secured the Have Claim ue of the erty?  5,000.00  The nature of yellow is simple, tenses, if known.	d claims on Schedule D: as Secured by Property.  Current value of the portion you own?  \$235,000.0

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1 Case 22-00297-hb Doc 15 Filed 03/03/22 Entered 03/03/22 14:46:06 Desc Main Document Page 4 of 48

Debt	or 1 <b>C</b>	arole Haire Coleman	_ common : age : or re	Case number (if known)	22-00297
Ca	re vane	trucks, tractors, sport utility ve	hicles metercycles		
. Ca	is, vaiis,	trucks, tractors, sport utility ve	micies, motorcycles		
	No				
	Yes				
3.1	Make:	BMW	Who has an interest in the property? Check one		red claims or exemptions. Put
	Model:	328 i	■ Debtor 1 only		secured claims on Schedule D: re Claims Secured by Property.
	Year:	2016	☐ Debtor 2 only		
		nate mileage: 66,000	Debtor 1 and Debtor 2 only	Current value of the entire property?	he Current value of the portion you own?
		ormation:	☐ At least one of the debtors and another		, ,
	Vin:				
	Debtor	values vehicle at \$17,000	☐ Check if this is community property	\$17,000	.00 \$17,000.00
			(see instructions)		
				D	
3.2	Make:	Ford	Who has an interest in the property? Check one		red claims or exemptions. Put secured claims on <i>Schedule D:</i>
	Model:	F-150 King Cab	■ Debtor 1 only		e Claims Secured by Property.
	Year:	2001	☐ Debtor 2 only	Current value of the	he Current value of the
	• • •	nate mileage: 220,000	Debtor 1 and Debtor 2 only	entire property?	portion you own?
		ormation:	$\square$ At least one of the debtors and another		
	VIN#	veduce vehicle of \$42,000	Пом. и жиз за	\$12,000	.00 \$12,000.00
	Deptor	values vehicle at \$12,000	☐ Check if this is community property (see instructions)		Ψ12,000.00
4.1	Make:	Honda	Who has an interest in the property? Check one	Do not deduct secu	red claims or exemptions. Put
	Model:	ATV	■ Debtor 1 only		secured claims on Schedule D: e Claims Secured by Property.
	Year:	2004	Debtor 2 only	Current value of the	
			Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other inf	ormation:	☐ At least one of the debtors and another		
	Dobto	r values ATV at \$500	☐ Check if this is community property	\$500.0	\$500.00
	Depto	values ATV at \$500	(see instructions)		
	ما 4 اما	Hammalina of the mention was	n for all of very outside from Deut C includio		
			n for all of your entries from Part 2, including		\$29,500.00
•				L	
art 3	Descri	be Your Personal and Household Ite	ems		
Оо у	ou own c	r have any legal or equitable in	terest in any of the following items?		Current value of the
					portion you own?
					Do not deduct secured claims or exemptions.
		goods and furnishings			
_	,	Major appliances, furniture, linens	, china, kitchenware		
	No				
	Yes. De	scribe			
		Ordinary House	hold Goods		\$500.00
		Ordinary House	nou goods		
	ctronics		and district continues		Hanklana ala sharari a 1 - 1
E	•	Televisions and radios; audio, vide including cell phones, cameras, m	eo, stereo, and digital equipment; computers, pr ledia plavers, games	inters, scanners; music co	ollections; electronic devices
	No	g con priorico, carriordo, fr	p.a, 5.5, ga65		
_					
	Yes. De	scribe			

Case 22-00297-hb Doc 15 Filed 03/03/22 Entered 03/03/22 14:46:06 Desc Main Page 5 of 48 Document Debtor 1 **Carole Haire Coleman** Case number (if known) 22-00297 Electronics \$800.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ☐ No Yes. Describe..... 2 Riding Lawn Mowers, Push Mower, Weed Eater, Hand Tools, \$1,000.00 Tiller 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment □ No Yes. Describe..... Remmington 18gauge Shotgun, \$200.00 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... **Everyday Clothing & Shoes** \$500.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver Yes. Describe..... Costume jewelry, Topaz Ring, Ruby Ring, Pearl Necklace \$350.00 13. Non-farm animals Examples: Dogs, cats, birds, horses ■ No

☐ Yes. Describe.....

14. Any other personal and household items you did not already list, including any health aids you did not list

☐ Yes. Give specific information.....

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here .....

\$3,350.00

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own? Do not deduct secured claims or exemptions.

Official Form 106A/B Schedule A/B: Property page 3 Case 22-00297-hb Doc 15 Filed 03/03/22 Entered 03/03/22 14:46:06 Desc Main Document Page 6 of 48

De	ebtor 1	Carole Ha	ire Colem	an	с	ase number (if known)	22-00297
16.	■ No		•		e, in a safe deposit box, and on hand w	hen you file your petit	ion
	☐ Yes						
17.	Examp _				ts; certificates of deposit; shares in cred th the same institution, list each.	dit unions, brokerage	houses, and other similar
	□ No ■ Yes				Institution name:		
			17.1.	Checking #9713	Bank of America		\$230.00
			17.2.	Savings #8894	Founders Federal Credit Unio	on	\$0.00
18.	Examp ■ No	les: Bond fun			rage firms, money market accounts		
	☐ Yes			Institution or issuer na	ne:		
19.	Non-pu joint v		l stock and	interests in incorpora	ted and unincorporated businesses,	, including an interes	st in an LLC, partnership, and
		Give specific		about themne of entity:		% of ownership:	
20.	Negoti	able instrume	<i>nts</i> include p	ersonal checks, cashi	ble and non-negotiable instruments rs' checks, promissory notes, and mon er to someone by signing or delivering		
	_	Give specific		about them uer name:			
21.		nent or pens les: Interests			(b), thrift savings accounts, or other per	nsion or profit-sharing	plans
	_	List each acc		ely. of account:	Institution name:		
			Pens	ion	PEBA; For life		\$0.00
			Pens	ion	Police Officers Retirment; De Husbands Pension, Debtor to Rest of her Life		\$0.00
22.	Your sl		used deposit	s you have made so th	at you may continue service or use fror olic utilities (electric, gas, water), teleco		nies, or others
					Institution name or individual:		
23.	Annuiti		ct for a perio	dic payment of money	o you, either for life or for a number of y	years)	
	■ No □ Yes		Issuer nam	e and description.			
24.	26 U.S.0			n an account in a qua and 529(b)(1).	ified ABLE program, or under a qual	lified state tuition pro	ogram.
	■ No □ Yes		Institution r	name and description.	Separately file the records of any interes	sts.11 U.S.C. § 521(c)	):

		Case 22-00297		Ooc 15	Filed 03/03/2 Document	2 Entered 0 Page 7 of 48		
Del	otor 1	Carole Haire Co	leman				Case number (if known)	22-00297
ı	No				(other than anything	ı listed in line 1), a	nd rights or powers exe	rcisable for your benefit
ı	<i>Exai</i> ■ No	nts, copyrights, trader nples: Internet domain in the comples of the complex of t	names, web	osites, proc			ents	
27.	Licer Exar ■ No	nses, franchises, and on the mples: Building permits,	other gene exclusive l	<b>ral intangi</b> icenses, co		holdings, liquor lice	enses, professional license	es
Мо	ney o	or property owed to yo	ou?					Current value of the portion you own?  Do not deduct secured claims or exemptions.
	⊒ No	refunds owed to you	tion about t	hem, includ	ling whether you alrea	dy filed the returns	and the tax years	
				Last Fi	led 2015;		State/Federal	\$0.00
ı	<i>Exar</i> ■ No			ony, spousa	ıl support, child suppo	rt, maintenance, div	orce settlement, property	settlement
	Exar ■ No	benefits; unpaid	lisability ins loans you r	urance pay made to so	vments, disability bene meone else	fits, sick pay, vacati	ion pay, workers' comper	sation, Social Security
_				ırance; hea	lth savings account (F	ISA); credit, homeo	wner's, or renter's insuran	се
	■ Ye	s. Name the insurance o	company of Company		y and list its value.	Benefic	iary:	Surrender or refund value:
			Prosperi	ity; Whole	e Life	Joshu	a Coleman	\$0.00
	If you some No	eone has died.	a living trus ation s, whether	et, expect p	roceeds from a life ins	urance policy, or ar or made a deman	e currently entitled to rece	vive property because
	□No				2.5			

Official Form 106A/B Schedule A/B: Property page 5

Debtor 1 Carole Haire Coleman Case number (if known) 22-00297

Debtor's pending action for recovery of title to 201 Ole Simpson Place Catawba SC Tax Map NO. 691-00-00-149 together with damages and attorney fees York County Case No. 2020CP4603338;

Unknown

34. Other contingent and No	unliquidated claims of every nature, inclu	iding counterclaims o	of the debtor and rights to	o set off claims
☐ Yes. Describe each	claim			
35. Any financial assets  ■ No □ Yes. Give specific ir	•			
	of all of your entries from Part 4, including number here		•	\$230.00
Part 5: Describe Any Busin	ess-Related Property You Own or Have an Inter	est In. List any real esta	te in Part 1.	
37. Do you own or have any	legal or equitable interest in any business-relate	ed property?		
■ No. Go to Part 6.				
☐ Yes. Go to line 38.				
	and Commercial Fishing-Related Property You interest in farmland, list it in Part 1.	Own or Have an Interes	t In.	
46. Do you own or have a	ny legal or equitable interest in any farm-	or commercial fishin	g-related property?	
No. Go to Part 7.				
☐ Yes. Go to line 47.				
Part 7: Describe All P	roperty You Own or Have an Interest in That You	u Did Not List Above		
	operty of any kind you did not already list kets, country club membership	?		
☐ Yes. Give specific in	formation			
54. Add the dollar value	of all of your entries from Part 7. Write th	at number here		\$0.00
Part 8: List the Totals of	f Each Part of this Form			
55. Part 1: Total real es	ate, line 2			\$235,000.00
56. Part 2: Total vehicle		\$29,500.00		
57. Part 3: Total person	al and household items, line 15	\$3,350.00		
58. Part 4: Total financi		\$230.00		
59. Part 5: Total busine	ss-related property, line 45	\$0.00		
60. Part 6: Total farm- a	nd fishing-related property, line 52	\$0.00		
61. Part 7: Total other p	roperty not listed, line 54 +	\$0.00		
62. Total personal prop	erty. Add lines 56 through 61	\$33,080.00	Copy personal property t	otal <b>\$33,080.00</b>
63. Total of all property	on Schedule A/B. Add line 55 + line 62			\$268,080.00

Official Form 106A/B Schedule A/B: Property page 6

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Fill in this info					
Debtor 1	Carole Haire Cole	eman			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	DISTRICT OF SOUTH	CAROLINA		
Case number	22-00297				
(if known)					Check if this is an amended filing

## Official Form 106C

## Schedule C: The Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B*: *Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2*: *Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

	■ You are claiming state and federal nonban	kruptcy exemptions.	11 U.S	S.C. § 522(b)(3)						
	☐ You are claiming federal exemptions. 11	U.S.C. § 522(b)(2)								
2.	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.									
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption					
	, , , , , , , , , , , , , , , ,	Copy the value from Schedule A/B	Che	eck only one box for each exemption.						
	211 Ole Simpson Place Catawba, SC 29704 York County	\$235,000.00		\$14,143.24	S.C. Code Ann. § 15-41-30(A)(1)(a)					
	TMS - 6910000051; Debtor values homa at \$175,000; Assessed value 2021 \$235,000 Line from <i>Schedule A/B</i> : 1.1			100% of fair market value, up to any applicable statutory limit						
	2004 Honda ATV Debtor values ATV at \$500	\$500.00		\$500.00	S.C. Code Ann. § 15-41-30(A)(7) Funded by					
	Line from Schedule A/B: 4.1			100% of fair market value, up to any applicable statutory limit	unused homestead					
	Ordinary Household Goods Line from Schedule A/B: 6.1	\$500.00		\$500.00	S.C. Code Ann. § 15-41-30(A)(3)					
	Line IIOIII Schedule AV.B. V.1			100% of fair market value, up to any applicable statutory limit	13-41-30(A)(3)					
	Electronics Line from Schedule A/B: 7.1	\$800.00		\$800.00	S.C. Code Ann. § 15-41-30(A)(7) Funded by					
	Line IIOIII Schedule AVD. 7.1			100% of fair market value, up to any applicable statutory limit	unused homestead					
	2 Riding Lawn Mowers, Push Mower, Weed Eater, Hand Tools, Tiller	\$1,000.00		\$1,000.00	S.C. Code Ann. § 15-41-30(A)(7) Funded by					
	Line from Schedule A/B: 9.1			100% of fair market value, up to any applicable statutory limit	unused homestead					

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ebtor 1 C	Carole Haire Coleman			Case number (if known)	22-00297
	scription of the property and line on le A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	ington 18gauge Shotgun, m <i>Schedule A/B</i> : 10.1	\$200.00		\$200.00	S.C. Code Ann. § 15-41-30(A)(15)
				100% of fair market value, up to any applicable statutory limit	
	day Clothing & Shoes	\$500.00		\$500.00	S.C. Code Ann. § 15-41-30(A)(3)
				100% of fair market value, up to any applicable statutory limit	
	me jewelry, Topaz Ring, Ruby Pearl Necklace	\$350.00	•	\$350.00	S.C. Code Ann. § 15-41-30(A)(4)
	m Schedule A/B: 12.1			100% of fair market value, up to any applicable statutory limit	10 11 00(1)(1)
	ing #9713: Bank of America	\$230.00		\$230.00	S.C. Code Ann. § 15-41-30(A)(7) Funded by
				100% of fair market value, up to any applicable statutory limit	unused homestead
	on: PEBA; For life m Schedule A/B: 21.1	\$0.00		\$0.00	S.C. Code Ann. § 9-1-1680
				100% of fair market value, up to any applicable statutory limit	
	on: PEBA; For life m Schedule A/B: 21.1	\$0.00		100%	11 U.S.C. § 522(b)(3)(C)
				100% of fair market value, up to any applicable statutory limit	
	on: Police Officers Retirment; sed Husbands Pension, Debtor	\$0.00		\$0.00	S.C. Code Ann. § 9-1-1680
	eive for the Rest of her Life m Schedule A/B: 21.2			100% of fair market value, up to any applicable statutory limit	
	on: Police Officers Retirment; sed Husbands Pension, Debtor	\$0.00		\$0.00	11 U.S.C. § 522(b)(3)(C)
to Rec	eive for the Rest of her Life m Schedule A/B: 21.2			100% of fair market value, up to any applicable statutory limit	
	erity; Whole Life ciary: Joshua Coleman	\$0.00		100%	S.C. Code Ann. § 38-63-40(A)
	m Schedule A/B: 31.1			100% of fair market value, up to any applicable statutory limit	
(Subjec	u claiming a homestead exemption of to adjustment on 4/01/22 and every 3			iled on or after the date of adjustmer	nt.)
■ No		al less also		045 June 16 4 6 6 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
□ Ye	es. Did you acquire the property covere No	ed by the exemption wi	ithin 1	,215 days before you filed this case	?
	Yes				

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		Document Page 1	L1 of 48	<u></u>	
Fill in this	s information to identify you	r case:			
Debtor 1	Carole Haire Co	leman			
	First Name	Middle Name Last Name			
Debtor 2					
(Spouse if, fili	ing) First Name	Middle Name Last Name			
United Sta	ates Bankruptcy Court for the:	DISTRICT OF SOUTH CAROLINA			
Case num	nber <b>22-00297</b>				
(if known)				_	if this is an
				amend	ded filing
Sched	plete and accurate as possible. I	Who Have Claims Secure  f two married people are filing together, both are but, number the entries, and attach it to this form.	equally responsible for sup	plying correct informa	
number (if k		out, number the entires, and attach it to this form	. On the top of any additions	ii pages, write your nai	ille alla case
1. Do any ci	reditors have claims secured by	your property?			
□ No	Check this box and submit th	nis form to the court with your other schedules.	You have nothing else to	report on this form	
_		•			
■ Ye	s. Fill in all of the information l	Delow.			
Part 1:	List All Secured Claims			0.1.	
		nore than one secured claim, list the creditor separat		Column B	Column C
		a particular claim, list the other creditors in Part 2. A cal order according to the creditor's name.	s Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 Am	erican Advisors		****		•
Gro	•	Describe the property that secures the claim:	\$220,856.76	\$235,000.00	\$0.00
Credit	tor's Name	211 Ole Simpson Place Catawba, SC 29704 York County TMS - 6910000051; Debtor values			
		homa at \$175,000; Assessed value 2021 \$235,000			
PO.	Box 40724	As of the date you file, the claim is: Check all that			
	sing, MI 48901-7924	apply.			
	er, Street, City, State & Zip Code	Contingent			
Nullib	er, Street, City, State & Zip Code	Unliquidated			
Who owes	s the debt? Check one.	Disputed  Nature of lien. Check all that apply.			
■ Debtor		☐ An agreement you made (such as mortgage or	secured		
Debtor 2	•	car loan)			
_	2 only 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)	1		
_	one of the debtors and another	☐ Judgment lien from a lawsuit			
		•			

**Reverse Mortgage** 

 $\hfill\square$  Check if this claim relates to a

community debt

Date debt was incurred

Other (including a right to offset)

Last 4 digits of account number

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Debtor 1 Carole Haire Coleman		Case number (if known)	22-00297	
First Name Middle Na	ame Last Name			
2.2 American Credit Acceptance	Describe the property that secures the claim:	\$21,401.00	\$17,000.00	\$4,401.00
Attn: Bankruptch 961 East Main Street Spartanburg, SC 29302	2016 BMW 328 i 66,000 miles Vin: Debtor values vehicle at \$17,000 As of the date you file, the claim is: Check all the apply. □ Contingent	nt .		
Number, Street, City, State & Zip Code	☐ Unliquidated ☐ Disputed			
Who owes the debt? Check one.  ■ Debtor 1 only  □ Debtor 2 only	Nature of lien. Check all that apply.  An agreement you made (such as mortgage of car loan)	or secured		
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim relates to a community debt	☐ Statutory lien (such as tax lien, mechanic's lie ☐ Judgment lien from a lawsuit ☐ Other (including a right to offset) ☐ Purcha	se Money Security		
Opened 10/19 Last Active 12/15/21	Last 4 digits of account number 60	91		
2.3 OneMain Financial Creditor's Name	Describe the property that secures the claim:  2001 Ford F-150 King Cab 220,000 miles	\$12,301.00 <u></u>	\$12,000.00	\$301.00
Attn: Bankruptcy Po Box 3251 Evansville, IN 47731	VIN # Debtor values vehicle at \$12,000 As of the date you file, the claim is: Check all the apply.  ☐ Contingent	at t		
Number, Street, City, State & Zip Code  Who owes the debt? Check one.	☐ Unliquidated ☐ Disputed Nature of lien. Check all that apply.			
■ Debtor 1 only □ Debtor 2 only	An agreement you made (such as mortgage of car loan)	or secured		
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Statutory lien (such as tax lien, mechanic's lie☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)  Purcha	se Money Security		
Opened 10/21 Last Date debt was incurred Active 01/22	Last 4 digits of account number18-	46		

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Debtor 1 Carole Haire Coleman		Case number (if known)	22-00297	
First Name Middle N	lame Last Name			
2.4 Secretary of Housing and Urban Developme	Describe the property that secures the claim:	\$0.00	\$235,000.00	\$0.00
Creditor's Name	211 Ole Simpson Place Catawba, SC 29704 York County TMS - 6910000051; Debtor values homa at \$175,000; Assessed value 2021 \$235,000			
451 7th Street Sw Washington, DC 20410	As of the date you file, the claim is: Check all the apply.  Contingent	at		
Number, Street, City, State & Zip Code	☐ Unliquidated ☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
■ Debtor 1 only □ Debtor 2 only	☐ An agreement you made (such as mortgage o car loan)	r secured		
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Statutory lien (such as tax lien, mechanic's lied☐ Judgment lien from a lawsuit	n)		
☐ Check if this claim relates to a community debt	Other (including a right to offset)	l Mortgage		
Date debt was incurred	Last 4 digits of account number			
If this is the last page of your form, add Write that number here:	Column A on this page. Write that number here: the dollar value totals from all pages.	\$254,558 \$254,558		
Use this page only if you have others to be trying to collect from you for a debt you of	oe notified about your bankruptcy for a debt that owe to someone else, list the creditor in Part 1, a t you listed in Part 1, list the additional creditors	nd then list the collection age	ency here. Similarly, if you h	nave more
Name, Number, Street, City, State & American Advisors Group c/o Bell Carrington 339 Heyward St 3d Fl		which line in Part 1 did you ent		

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Fill in th	is information to	identify your c	ase:			
Debtor 1	Caro	le Haire Coler	man			
	First Na		Middle Name	Last Name		
Debtor 2						
(Spouse if,	filing) First Na	me	Middle Name	Last Name		
United S	tates Bankruptcy	Court for the:	DISTRICT OF SOU	TH CAROLINA		
Case nui	mber <b>22-0029</b>	7				
(if known)	<u> </u>	<u> </u>				1 Check if this is an
					_	amended filing
O.L	LE 400E	- /				
	l Form 106E					
				ecured Claims	Part 2 for creditors with NONPRIORITY	12/15
Schedule Schedule left. Attach name and	G: Executory Contr D: Creditors Who I h the Continuation case number (if kn	racts and Unexpir lave Claims Secu Page to this page own).	red Leases (Official Fo ired by Property. If mor e. If you have no inform	rm 106G). Do not include re space is needed, copy t	contracts on Schedule A/B: Property (C any creditors with partially secured cla the Part you need, fill it out, number th do not file that Part. On the top of any a	ims that are listed in entries in the boxes on the
Part 1:	List All of You					
_	•	riority unsecured	I claims against you?			
	o. Go to Part 2.					
☐ Ye	es.					
Part 2:	List All of You	NONPRIORITY	Y Unsecured Claims	i		
3. Do ar	ny creditors have n	onpriority unsec	ured claims against yo	u?	edules	
3. <b>Do ar</b>	ny creditors have no. You have nothing	onpriority unsec	ured claims against yo		edules.	
3. Do ar	ny creditors have no. You have nothing	onpriority unsec	ured claims against yo	u?	edules.	
3. Do ar  No Ye  4. List a unsec than c	ny creditors have no. You have nothing es.  all of your nonprior cured claim, list the cone creditor holds a	onpriority unsect to report in this pa ity unsecured cla preditor separately	ured claims against you art. Submit this form to the alphabetical for each claim. For each	u?  le court with your other sche  l order of the creditor who  claim listed, identify what t	edules.  • holds each claim. If a creditor has more ype of claim it is. Do not list claims alread three nonpriority unsecured claims fill ou	y included in Part 1. If more
<ol> <li>Do ar</li> <li>□ No</li> <li>■ Ye</li> <li>List a unsection</li> </ol>	ny creditors have no. You have nothing es.  all of your nonprior cured claim, list the cone creditor holds a	onpriority unsect to report in this pa ity unsecured cla preditor separately	ured claims against you art. Submit this form to the alphabetical for each claim. For each	u?  le court with your other sche  l order of the creditor who  claim listed, identify what t	holds each claim. If a creditor has more ype of claim it is. Do not list claims alread	y included in Part 1. If more
<ol> <li>Do ar</li> <li>No</li> <li>Ye</li> <li>List a unsecthan or Part 2</li> </ol>	ny creditors have no. You have nothing es.  all of your nonprior cone claim, list the cone creditor holds a 2.	onpriority unsect to report in this pa ity unsecured cla preditor separately	ured claims against you art. Submit this form to the aims in the alphabetical for each claim. For each st the other creditors in P	u?  le court with your other sche  l order of the creditor who  n claim listed, identify what t  Part 3.If you have more than	p holds each claim. If a creditor has more ype of claim it is. Do not list claims alread three nonpriority unsecured claims fill ou	y included in Part 1. If more the Continuation Page of
<ol> <li>Do ar</li> <li>No</li> <li>Ye</li> <li>List a unsecthan or Part 2</li> </ol>	ny creditors have no. You have nothing es.  all of your nonprior cured claim, list the cone creditor holds a	onpriority unsect to report in this pa ity unsecured cla preditor separately particular claim, lis	ured claims against you art. Submit this form to the aims in the alphabetical for each claim. For each st the other creditors in P	u?  le court with your other sche  l order of the creditor who  claim listed, identify what t	p holds each claim. If a creditor has more type of claim it is. Do not list claims alread three nonpriority unsecured claims fill ou	y included in Part 1. If more the Continuation Page of
3. Do ar  No Ye  4. List a unsection of Part 2	ny creditors have no. You have nothing es.  all of your nonprior cured claim, list the cone creditor holds a 2.  Ally Financial Nonpriority Creditor's Attn: Bankrupto	to report in this pa ity unsecured cla creditor separately particular claim, lis	ured claims against you art. Submit this form to the aims in the alphabetical for each claim. For each st the other creditors in P	u?  I order of the creditor who a claim listed, identify what the transfer of the creditor who have more than a ligits of account number	p holds each claim. If a creditor has more type of claim it is. Do not list claims alread three nonpriority unsecured claims fill out 4624  Opened 9/11/18 Last Active	y included in Part 1. If more the Continuation Page of
3. Do ar  No Ye  4. List a unsec than o Part 2	ny creditors have no. You have nothing es.  all of your nonprior cured claim, list the cone creditor holds a 2.  Ally Financial Nonpriority Creditor's Attn: Bankrupto Po Box 380901	to report in this pa ity unsecured cla creditor separately particular claim, lis	ured claims against you art. Submit this form to the aims in the alphabetical for each claim. For each st the other creditors in P	u?  le court with your other sche  l order of the creditor who  n claim listed, identify what t  Part 3.If you have more than	p holds each claim. If a creditor has more type of claim it is. Do not list claims alread three nonpriority unsecured claims fill ou	y included in Part 1. If more the Continuation Page of
3. Do ar  No Ye  4. List a unsection of Part 2	ny creditors have no. You have nothing es.  all of your nonprior cured claim, list the cone creditor holds a 2.  Ally Financial Nonpriority Creditor's Attn: Bankrupto	to report in this pa ity unsecured cla ireditor separately particular claim, lis	ured claims against you art. Submit this form to the aims in the alphabetical for each claim. For each st the other creditors in P  Last 4 d	u?  I order of the creditor who a claim listed, identify what the transfer of the creditor who have more than a ligits of account number	p holds each claim. If a creditor has more type of claim it is. Do not list claims alread three nonpriority unsecured claims fill out 4624  Opened 9/11/18 Last Active 08/19	y included in Part 1. If more the Continuation Page of
3. Do ar  No  Ye  4. List a unsec than o Part 2	ny creditors have nothing ones.  all of your nonprior cured claim, list the cone creditor holds a 2.  Ally Financial Nonpriority Creditor's Attn: Bankruptor Box 380901 Bloomington, Note of the cone	to report in this particular claim, list Name  N	ured claims against you art. Submit this form to the aims in the alphabetical for each claim. For each st the other creditors in P  Last 4 d	u?  It order of the creditor who in claim listed, identify what the creditor who is a claim listed, identify what the creditor who is a claim listed, identify what the credit of the cr	p holds each claim. If a creditor has more type of claim it is. Do not list claims alread three nonpriority unsecured claims fill out 4624  Opened 9/11/18 Last Active 08/19	y included in Part 1. If more the Continuation Page of
3. Do ar  No Ye  4. List a unsecthan of Part 2	ny creditors have no. You have nothing es.  all of your nonprior cured claim, list the cone creditor holds a 2.  Ally Financial Nonpriority Creditor's Attn: Bankrupto Po Box 380901 Bloomington, Number Street City S	to report in this particular claim, list Name  N	ured claims against you art. Submit this form to the aims in the alphabetical for each claim. For each st the other creditors in P  Last 4 d	u?  I order of the creditor who can claim listed, identify what the creditor who have more than a light of account number was the debt incurred?  I order of the creditor who have more than a light of account number was the debt incurred?	p holds each claim. If a creditor has more type of claim it is. Do not list claims alread three nonpriority unsecured claims fill out 4624  Opened 9/11/18 Last Active 08/19	y included in Part 1. If more the Continuation Page of
3. Do ar  No  Ye  4. List a unsection of Part 2	ny creditors have no. You have nothing es.  all of your nonprior cured claim, list the cone creditor holds a 2.  Ally Financial Nonpriority Creditor's Attn: Bankrupte Attn: Bankrupte Box 380901  Bloomington, Number Street City Swho incurred the d	to report in this particular claim, list Name  N	ured claims against you  art. Submit this form to the  tims in the alphabetical for each claim. For each at the other creditors in P  Last 4 d  When w  As of th	u?  I order of the creditor who can claim listed, identify what the creditor who have more than a ligits of account number was the debt incurred?  The date you file, the claim in the count ingent	p holds each claim. If a creditor has more type of claim it is. Do not list claims alread three nonpriority unsecured claims fill out 4624  Opened 9/11/18 Last Active 08/19	y included in Part 1. If more the Continuation Page of
3. Do ar  No  Ye  4. List a unsection of Part 2	ny creditors have no. You have nothing es.  all of your nonprior cured claim, list the cone creditor holds a 2.  Ally Financial Nonpriority Creditor's Attn: Bankrupte Po Box 380901 Bloomington, Number Street City S Who incurred the d	to report in this particular claim, list Name  EV  IN 55438  State Zip Code  ebt? Check one.	ured claims against you art. Submit this form to the aims in the alphabetical for each claim. For each st the other creditors in P  Last 4 d  When w  As of th	u?  I order of the creditor who can claim listed, identify what the creditor who have more than a ligits of account number was the debt incurred?  I order of the creditor who have more than a ligits of account number was the debt incurred?  I order of the creditor who have more than a ligits of account number was the debt incurred?  I order of the creditor who have more than a ligits of account number was the debt incurred?	p holds each claim. If a creditor has more type of claim it is. Do not list claims alread three nonpriority unsecured claims fill out 4624  Opened 9/11/18 Last Active 08/19	y included in Part 1. If more the Continuation Page of
3. Do ar  No Ye  4. List a unsecthan of Part 2	ny creditors have no. You have nothing es.  all of your nonprior cured claim, list the cone creditor holds a 2.  Ally Financial Nonpriority Creditor's Attn: Bankrupte Po Box 380901 Bloomington, Number Street City Swho incurred the decent polystory and polystory only Debtor 1 only	to report in this particular claim, list Name  N	ured claims against you  art. Submit this form to the  tims in the alphabetical for each claim. For each st the other creditors in P  Last 4 d  When w  As of th  Cont  Dispp	u?  I order of the creditor who can claim listed, identify what the creditor who have more than a ligits of account number was the debt incurred?  I order of the creditor who have more than a ligits of account number was the debt incurred?  I order of the creditor who have more than a ligits of account number was the debt incurred?  I order of the creditor who have more than a ligits of account number was the debt incurred?	holds each claim. If a creditor has more type of claim it is. Do not list claims alread three nonpriority unsecured claims fill ou  4624  Opened 9/11/18 Last Active 08/19	y included in Part 1. If more the Continuation Page of
<ul> <li>3. Do ar</li> <li>Ye</li> <li>4. List a unsection of Part 2</li> <li>4.1</li> <li>In the part 2</li> <li></li></ul>	ny creditors have no. You have nothing es.  all of your nonprior cured claim, list the cone creditor holds a 2.  Ally Financial Nonpriority Creditor's Attn: Bankrupte Box 380901 Bloomington, Number Street City Swho incurred the d Debtor 1 only Debtor 2 only Debtor 1 and Det	to report in this particular claim, list Name  Cy  MN 55438  State Zip Code  ebt? Check one.	ured claims against you art. Submit this form to the aims in the alphabetical for each claim. For each st the other creditors in P  Last 4 d  When w  As of th  Cont Unliq Disput	u?  I order of the creditor who a claim listed, identify what the tract 3. If you have more than ligits of account number was the debt incurred?  I date you file, the claim is ingent quidated uited	holds each claim. If a creditor has more type of claim it is. Do not list claims alread three nonpriority unsecured claims fill ou  4624  Opened 9/11/18 Last Active 08/19	y included in Part 1. If more the Continuation Page of
<ul> <li>3. Do ar</li> <li>No</li> <li>Ye</li> <li>4. List a unsection of Part 2</li> <li>4.1</li> <li>Interpretation of Part 2</li> </ul>	ny creditors have no. You have nothing es.  all of your nonprior cured claim, list the cone creditor holds a 2.  Ally Financial Nonpriority Creditor's Attn: Bankrupte Po Box 380901 Bloomington, Number Street City Swho incurred the d  Debtor 1 only  Debtor 2 only  At least one of the	to report in this particular claim, list ity unsecured claim reditor separately particular claim, list in Name  Cy  MN 55438  State Zip Code  ebt? Check one.	ured claims against you art. Submit this form to the aims in the alphabetical for each claim. For each st the other creditors in P  Last 4 d  When w  As of th  Cont Unliq Disputer Type of nunity Gallonian	u?  I order of the creditor who can claim listed, identify what the creditor who can claim listed, identify what the control of the creditor who can claim listed, identify what the control of the contr	holds each claim. If a creditor has more type of claim it is. Do not list claims alread three nonpriority unsecured claims fill ou  4624  Opened 9/11/18 Last Active 08/19	y included in Part 1. If more in the Continuation Page of  Total claim  \$4,264.00
3. Do ar  No  Ye  4. List a unsection of Part 2	ny creditors have no. You have nothing es.  all of your nonprior cured claim, list the cone creditor holds a 2.  Ally Financial Nonpriority Creditor's Attn: Bankruptor Po Box 380901  Bloomington, M. Number Street City S. Who incurred the d  Debtor 1 only  Debtor 2 only  Debtor 1 and Det  At least one of the Check if this cladebt	to report in this particular claim, list ity unsecured claim reditor separately particular claim, list in Name  Cy  MN 55438  State Zip Code  ebt? Check one.	ured claims against you art. Submit this form to the aims in the alphabetical for each claim. For each st the other creditors in P  Last 4 d  When w  As of th  Cont Unliq Disputer ther Type of nunity Students	u?  I order of the creditor who can claim listed, identify what the creditor who had a claim listed, identify what the creditor who had a claim listed, identify what the credit some control of the credit some c	holds each claim. If a creditor has more type of claim it is. Do not list claims alread three nonpriority unsecured claims fill ou  4624  Opened 9/11/18 Last Active 08/19  is: Check all that apply	y included in Part 1. If more in the Continuation Page of  Total claim  \$4,264.00

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Carole Haire Coleman Case number (if known) 22-00297

Depto	Carole Haire Coleman	Case number (if known) 22-00297	
4.2	Caine & Weiner	Last 4 digits of account number 3631	\$589.00
	Nonpriority Creditor's Name Attn: Bankruptcy 5805 Sepulveda Blvd Sherman Oaks, CA 91411	When was the debt incurred?  Opened 03/20 Last Active 12/19	_
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Collection Attorney Progressive	_
4.3	Citifinancial, Inc. Nonpriority Creditor's Name	Last 4 digits of account number 2384	\$0.00
	c/o Nikole D Haltiwnger Esq. PO Bo 11412 Columbia, SC 29211	When was the debt incurred?	_
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Notice Only	_
4.4	Corey Alan Goldstein Nonpriority Creditor's Name	Last 4 digits of account number	Unknown
	611 Tom Hall St Fort Mill, SC 29715-2032	When was the debt incurred?	_
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Coleman vs Goldstein	

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Deptoi	Carole naire Coleman		Case Humber (ii known) 22-00297	
4.5	Credit Coll	Last 4 digits of account number	6730	\$368.00
	Nonpriority Creditor's Name Attn: Bankruptcy 725 Canton Street Norwood, MA 02062	When was the debt incurred?	Opened 03/21 Last Active 12/20	
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	■ Other. Specify Co	Attorney Allstate Fire Casual In.	
4.6	Creditors Bureau Associates	Last 4 digits of account number	3067	\$693.00
	Nonpriority Creditor's Name Attn: Bankruptcy 112 Ward St	When was the debt incurred?	Opened 7/13/21 Last Active 03/21	
	Macon, GA 31204  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	rration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Medical De	bt Carolinas Imaging Services	
4.7	Equifax Nonpriority Creditor's Name	Last 4 digits of account number		\$0.00
	Po Box 740241 Atlanta, GA 30374-0256	When was the debt incurred?		
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	Debtor 1 only	По :: .		
		☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecured	d claim:	
		Student loans		
	☐ Check if this claim is for a community debt Is the claim subject to offset?		ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	■ Other, Specify Notice only		
	55	- Other, Specify 1101100 Offing		

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Debto	Carole Haire Coleman		Case number (if known) 22-00297	
4.8	Experian (www dispute)	Last 4 digits of account number		\$0.00
	Nonpriority Creditor's Name PO Box 2002	When was the debt incurred?		
	Allen, TX 75013-2002  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	_			
	Debtor 1 only	Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured	l claim:	
	☐ At least one of the debtors and another	Student loans	i Ciaiiii.	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	<u> </u>	report as priority claims	a plane, and other similar debts	
	■ No □ Yes	☐ Debts to pension or profit-sharin  ☐ Other. Specify  Notice only	9 !	
	_ 163	Other. Specify		
4.9	Founders Federal CU	Last 4 digits of account number	2001	\$3,401.00
	Nonpriority Creditor's Name Attn: Bankruptcy 737 Plantation Rd Lancaster, SC 29720	When was the debt incurred?	Opened 12/22/20 Last Active 02/22	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	■ Other. Specify Unsecured		
4.1	Greenes Funeral Home	Last 4 digits of account number		\$0.00
0	Nonpriority Creditor's Name 355 East White St	When was the debt incurred?		
	Rock Hill, SC 29730	= Acceptacy data as the state of		
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Cneck all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	□ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other Specify Notice only	,	

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Debt	or 1 Carole Haire Coleman	Case number (if known) 22-00297	
4.1	Innovis	Look 4 divite of account number	\$0.00
1	Nonpriority Creditor's Name PO Box 1689 Pittsburgh, PA 15230	Last 4 digits of account number  When was the debt incurred?	Ψ0.00
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	_	□ Student loans	
	☐ Check if this claim is for a community debt  Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify notice only	
4.1	Internal Revenue Service (p)		\$0.00
2	Nonpriority Creditor's Name	Last 4 digits of account number	φυ.υυ
	Centralized Insolvency Operation PO Box 7346	When was the debt incurred?	
	Philadelphia, PA 19101-7346  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	117	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Notice only	
4.1	Jarrunis L Yates	Last 4 digits of account number 3338	Unknown
	Nonpriority Creditor's Name	- <u> </u>	
	PO Box 36364	When was the debt incurred?	
	Rock Hill, SC 29732-0506  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	11,	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	Coleman vs Maverick, Goldstein  Other. Specify  Notice Only	

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Case number (if known) Debtor 1 Carole Haire Coleman 22-00297 4.1 Lucy L McDow Unknown Last 4 digits of account number 4 Nonpriority Creditor's Name **PO Box 767** When was the debt incurred? Rock Hill, SC 29731-6767 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Legal Services ☐ Yes 4.1 **Maverick Venture Group East LLC** Unknown Last 4 digits of account number 5 Nonpriority Creditor's Name 611 Tom Hall St When was the debt incurred? Fort Mill, SC 29715-2032 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Coleman vs Maverick ☐ Yes 4.1 Paragon Revenue Group 7655 \$230.00 Last 4 digits of account number 6 Nonpriority Creditor's Name Attn: Bankruptcy Opened 08/21 Last Active Po Box 127 When was the debt incurred? 04/21 Concord, NC 28025 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim:  $\square$  At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No Collection Attorney Shiland Family ■ Other. Specify Medicine - Rock ☐ Yes

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Carole naire Coleman		Case Humber (II known)	
Resurgent Capital Services Nonpriority Creditor's Name	Last 4 digits of account number	4894	\$614.00
Attn: Bankruptcy Po Box 10497 Greenville, SC 29603	When was the debt incurred?	Opened 06/20 Last Active 7/19/21	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
No	☐ Debts to pension or profit-sharing		
Yes	Other. Specify    Garding Company   Company Co	Company Account Credit One	
S.C. Department of Revenue	Last 4 digits of account number		\$0.00
Nonpriority Creditor's Name PO Box 12265 Columbia, SC 29211	When was the debt incurred?		
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Notice only		
S.C. Department of Revenue	Last 4 digits of account number		\$0.00
Nonpriority Creditor's Name  GEAR			
300A Outlet Pointe Boulevard			
Columbia, SC 29210  Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
Who incurred the debt? Check one.	<b>,</b>	11.7	
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt	☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	■ Other, Specify Notice only	,	

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Carole Haire Coleman Case number (if known) 22-00297

Carole Haire Coleman		Case number (if known) 22-00297	
S.C. Department of Revenue	Last 4 digits of account number		\$0.00
Nonpriority Creditor's Name  Correspondence  PO Box 125	When was the debt incurred?		
Columbia, SC 29214  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims	,	
No	☐ Debts to pension or profit-sharing		
Yes	Other. Specify notice only		
Sunbelt Credit	Last 4 digits of account number	5541	\$480.0
Nonpriority Creditor's Name Attn: Bankruptcy 208 East Main Street	When was the debt incurred?	Opened 05/21 Last Active 12/21	
Spartanburg, SC 28306  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Secured		
Sunbelt Credit	Last 4 digits of account number	1321	\$480.00
Nonpriority Creditor's Name Attn: Bankruptcy 208 East Main Street Spartanburg, SC 28306	When was the debt incurred?	Opened 5/11/21 Last Active 12/31/21	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community		ration agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims  Debts to pension or profit-sharir	a plane, and other similar debte	
No	, ,	y pians, and other similal debts	
☐ Yes	Other. Specify Secured		

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Debto	Carole Haire Coleman	Case number (if known) 22-00297	
4.2	Trans Union	Last 4 digits of account number	\$0.00
	Nonpriority Creditor's Name PO Box 1000 Chester, PA 19016	When was the debt incurred?	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify notice only	
4.2	U.S. Attorney Office  Nonpriority Creditor's Name	Last 4 digits of account number 2384	\$0.00
	Attn: Civil Process Clerk 55 Beattie Place Ste 700	When was the debt incurred?	
	Greenville, SC 29601  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	□ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Notice only	
4.2	U.S. Attorney's Office (P)	Last 4 digits of account number 2384	\$0.00
	Nonpriority Creditor's Name District of South Carolina Attn: Civil Process Clerk 1441 Main St Ste 500	When was the debt incurred?	
	Columbia, SC 29201  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Notice	

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Debtor	1 Carole Haire Coleman		Case number (if known)	22-00297	
4.2	US Department of Education	Last 4 digits of account number			\$0.00
<u> </u>	Nonpriority Creditor's Name Federal Offset Unit PO Box 5227	When was the debt incurred?			
	Greenville, TX 75403  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	$\square$ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	aration agreement or divorce t	hat you did not	
	Is the claim subject to offset?	report as priority claims			
	■ No	Debts to pension or profit-sharing		ots	
	Yes	Other. Specify Notice only	<u>'</u>		
4.2	US Department of the Treasury	Last 4 digits of account number			\$0.00
	Nonpriority Creditor's Name Bureau of the Fiscal Service Debt Management Services PO Box 1686	When was the debt incurred?			
	Birmingham, AL 35201  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce t	hat you did not	
	■ No	☐ Debts to pension or profit-sharin	ng plans, and other similar deb	ots	
	☐ Yes	Other. Specify Notice only	<u> </u>		
4.2	World Finance Company	Last 4 digits of account number	1201		\$2,052.00
8	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 6429	When was the debt incurred?	Opened 12/20 Last 12/21/21	Active	Ψ2,002.00
	Greenville, SC 29606  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim			
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa		hat you did not	
	Is the claim subject to offset?	report as priority claims	5 2. 2 3.00	,	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar deb	ots	
	☐ Yes	■ Other. Specify Secured			

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Debtor 1 Carole Haire Coleman Case number (if known) 22-00297 4.2 \$0.00 York County 9 Last 4 digits of account number Nonpriority Creditor's Name Tax Collection/Finance When was the debt incurred? **PO Box 116** York, SC 29745 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Notice Only ☐ Yes Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Line **4.4** of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 7403

**Spencer Andrew Syrett** 

Columbia, SC 29202-7403

■ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
	6f.	Student loans	6f.	\$ 0.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 13,171.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 13,171.00

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Fill in this infor	mation to identify your	case:		
Debtor 1	Carole Haire Cole	eman		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		DISTRICT OF SOUTH (	CAROLINA	
Case number	22-00297			
(if known)				☐ Check if this is amended filing

## Official Form 106G

## **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with Name, Number	whom you have th , Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.2	Name				<u> </u>
	Number	Street			
	City		State	ZIP Code	
2.3					<u></u>
	Name				
	Number	Street			
	City		State	ZIP Code	
2.4					
	Name				
	Number	Street			_
	City		State	ZIP Code	<del>_</del>
2.5	-				
	Name				
	Number	Street			
	City		State	ZIP Code	<del>_</del>

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		Docume	ili Faye 20 C	JI 40	
Fill in this	information to identify your	case:			
Debtor 1	Carole Haire Cole	man			
Debtor 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filin	ng) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	DISTRICT OF SOUTH	CAROLINA		
Case num	ber <b>22-00297</b>				
(if known)					☐ Check if this is an
					amended filing
Officia	l Form 106H				
_		. 1. 4			
Sched	lule H: Your Cod	ebtors			12/15
No Yes  2. With Arizon  No. Yes  3. In Colin line Form	hin the last 8 years, have you ha, California, Idaho, Louisiana, Go to line 3.  S. Did your spouse, former spoulumn 1, list all of your codebte 2 again as a codebtor only in 106D), Schedule E/F (Official	I lived in a community properties of the liver of the liver of the liver of the liver or some of the liver of the liver or some or s	roperty state or territo lerto Rico, Texas, Wash e with you at the time? r spouse as a codebto litor or cosigner. Make	ry? (Community property lington, and Wisconsin.) r if your spouse is filing sure you have listed th	states and territories include  with you. List the person shown e creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	olumn 2.  Column 1: Your codebtor  Name, Number, Street, City, State and Zl	P Code		Column 2: The cree Check all schedules	ditor to whom you owe the debt
				ones. an objection	
3.1	Name			Schedule D, line	
	Name			☐ Schedule E/F, lii	
				☐ Schedule G, line	
	Number Street			_	
	City	State	ZIP Code		
3.2				□ Cohodulo D line	
	Name			☐ Schedule D, line☐ Schedule E/F, line☐	
				Schedule E/F, III	
=					
	Number Street City	State	ZIP Code		
	=:-7		2 0000		

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Eill	in this information to identify your a	200:				I				
	in this information to identify your control Carole Haire									
	otor 2  buse, if filing)				_					
Uni	ted States Bankruptcy Court for the	: DISTRICT OF SOUTH	H CAROLINA		_					
1	se number <b>22-00297</b>		_			Chec	k if this is			
(If kr	nown)							ent showin	ng postpetition ollowing date:	chapter
0	fficial Form 106I					<u></u>	/M / DD/ \	/YYY		
S	chedule I: Your Inc	ome					, 22,			12/15
sup spo atta	as complete and accurate as possible plying correct information. If you use. If you are separated and you ch a separate sheet to this form.  Describe Employment	are married and not filing wi	ng jointly, and your s ith you, do not includ	spouse i de inforr	s liv natio	ing with on abou	you, incl t your spe	ude inforr	mation about ore space is	your needed,
1.	Fill in your employment information.		Debtor 1				Debtor 2	2 or non-fi	iling spouse	
	If you have more than one job, attach a separate page with	Employment status	☐ Employed	☐ Employed			☐ Employed —			
	information about additional employers.		■ Not employed				☐ Not e	mployed		
	Include part-time, seasonal, or	Occupation	Retired							
	self-employed work.	Employer's name								
	Occupation may include student or homemaker, if it applies.	Employer's address								
		How long employed t	here?				_			
Pai	rt 2: Give Details About Mor	nthly Income								
spoi	mate monthly income as of the duse unless you are separated.				•				·	-
•	e space, attach a separate sheet to		ombine the information	i ioi ali e	mpic	byers for	triat perso	on on the ii	mes below. II	you need
						For De	btor 1		btor 2 or ing spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$		0.00	\$	N/A	
3.	Estimate and list monthly overt	ime pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$		0.00	\$	N/A	

Debto	or 1	Carole Haire Coleman		Case	number (if known)	22-002	:97	
				For	Debtor 1	For D	ebtor 2 or	
							ling spouse	
	Cop	by line 4 here	4.	\$_	0.00	\$	N/A	<u>\</u>
5.	List	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$	N/A	١
	5b.	Mandatory contributions for retirement plans	5b.	\$_	0.00	\$	N/A	<u></u>
	5c.	Voluntary contributions for retirement plans	5c.	\$_	0.00	\$	N/A	<u>\</u>
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	N/A	<del>-</del>
	5e.	Insurance	5e.	\$_	0.00	\$	N/A	<u></u>
	5f.	Domestic support obligations	5f.	\$	0.00	\$	N/A	<u> </u>
	5g.	Union dues	5g.	\$	0.00	\$	N/A	<u>\</u>
	5h.	Other deductions. Specify:	5h.+	- \$_	0.00	+ \$	N/A	\
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	0.00	\$	N/A	<u>\</u>
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	0.00	\$	N/A	<u>\</u>
8.	<b>List</b> 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross						
		receipts, ordinary and necessary business expenses, and the total		_		_		
		monthly net income.	8a.	\$_	0.00	\$	N/A	
	8b.	Interest and dividends	8b.	\$_	0.00	\$	N/A	<u>\</u>
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	1 <b>t</b> 8c.	\$	0.00	\$	N/A	
	8d.		8d.	\$ -	0.00	\$	N/A	
	8e.	Social Security	8e.	\$ -	1,853.30	\$	N/A	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	ce 8f.	\$_	0.00	\$	N/A	<u> </u>
	8g.	Pension or retirement income	8g.	\$	0.00	\$	N/A	<u>\</u>
		SC Retirement \$800 gross (net		_	000.00	_	N1/4	
	8h.	Other monthly income. Specify: after ins benefits)	8h.+	· : —	232.00	· · · · · · · · · · · · · · · · · · ·	N/A	_
		SC Pol Off Retirmenet late husband		\$_	1,345.91	\$	N/A	<u>\</u>
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	3,431.21	\$	N/	<b>'A</b>
		culate monthly income. Add line 7 + line 9. If the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		3,431.21 + \$		<b>N/A</b> = \$	3,431.21
	Inclu othe Do i	te all other regular contributions to the expenses that you list in Schedul ude contributions from an unmarried partner, members of your household, you er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are no ecify:	ır depen		•	•	hedule J. 11. +\$	0.00
		If the amount in the last column of line 10 to the amount in line 11. The rester that amount on the Summary of Schedules and Statistical Summary of Certailies					12. \$	3,431.21
12	Do:	wou expect an increase or decrease within the year often you file this form	m2				Combi month	ined ily income
13.	<b>■</b>	you expect an increase or decrease within the year after you file this form No.	II f					
		Yes. Explain: Debtor stopped receiving rental income in Fall 2 Rd.	2021 fr	om 2	019 buyer of p	property	at 201 Ole	Simpson

Official Form 106l Schedule I: Your Income page 2

Fill	in this informa	tion to identify yo	our case:			İ		
Deb		Carole Haire		1		_	k if this is:	
	tor 2							ving postpetition chapter
` '	ouse, if filing)					_		the following date:
Unite	ed States Bankr	uptcy Court for the	: DISTRI	CT OF SOUTH CAROLINA	<u> </u>	1	MM / DD / YYYY	
	e number 22 nown)	2-00297						
Of	fficial Fo	rm 106J						
		J: Your						12/15
info	rmation. If m		eded, atta	. If two married people ar ch another sheet to this i n.				
Part		ibe Your House	hold					
1.	Is this a joir							
	■ No. Go to	= .	in a separ	ate household?				
	□ N	0		al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of Debte	or 2.	
2.	Do you have	e dependents?	■ No					
	Do not list Do Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state							□ No
	dependents	names.						□ Yes □ No
								☐ Yes
								□ No
								☐ Yes ☐ No
								☐ Yes
3.		enses include f people other t	han	No				
		d your depende		Yes				
Part	t 2: Estim	ate Your Ongoi	ng Monthi	y Expenses				
exp				uptcy filing date unless y y is filed. If this is a supp				
the		n assistance an		government assistance it luded it on <i>Schedule I:</i> Y			Your exp	enses
(OII	iiciai Foiiii 10	ю.,					100.000	
4.		or home owners and any rent for th		ses for your residence. In r lot.	nclude first mortgag	e 4. \$		0.00
	If not includ	led in line 4:						
		estate taxes				4a. \$		100.00
		rty, homeowner's				4b. \$		200.00
		maintenance, re owner's associa		ıpkeep expenses dominium dues		4c. \$ 4d. \$		42.00 0.00
5.				our residence, such as ho	me equity loans	5. \$		0.00

Debtor 1 Carole H	aire Coleman	Case number (if know	wn) <b>22-00297</b>
6. Utilities:			
6a. Electricity	heat, natural gas	6a. \$	290.00
6b. Water, se	wer, garbage collection	6b. \$	30.00
6c. Telephone	e, cell phone, Internet, satellite, and cable services	6c. \$	295.00
6d. Other. Sp	ecify:	6d. \$	0.00
Food and hous	ekeeping supplies	7. \$	350.00
Childcare and	children's education costs	8. \$	0.00
Clothing, laund	ry, and dry cleaning	9. \$	25.00
. Personal care p	roducts and services	10. \$	50.00
. Medical and de	ntal expenses	11. \$	100.00
	Include gas, maintenance, bus or train fare.	40	E0.00
Do not include o	1 )	12. \$	50.00
	clubs, recreation, newspapers, magazines, and books	13. \$	0.00
	ributions and religious donations	14. \$	0.00
. Insurance.	annon and adverted from the company on included in lines A on 20		
15a. Life insura	surance deducted from your pay or included in lines 4 or 20.	15a. \$	106.00
15b. Health ins		15b. \$	
15b. Health ins		15b. \$	0.00
15d. Other inst		15d. \$	132.00
	• •		0.00
Specify:	clude taxes deducted from your pay or included in lines 4 or 20	J. 16. \$	0.00
Installment or I	paso navmonts:		0.00
	ents for Vehicle 1	17a. \$	0.00
. ,	ents for Vehicle 2	17b. \$	0.00
17c. Other. Sp		17c. \$	0.00
17d. Other. Sp		17d. \$	0.00
•	of alimony, maintenance, and support that you did not rep		0.00
	your pay on line 5, Schedule I, Your Income (Official Form		0.00
	s you make to support others who do not live with you.	\$	0.00
Specify:		19.	
	erty expenses not included in lines 4 or 5 of this form or o	n Schedule I: Your Incon	ne.
20a. Mortgage	s on other property	20a. \$	0.00
20b. Real estat	e taxes	20b. \$	0.00
20c. Property,	nomeowner's, or renter's insurance	20c. \$	0.00
20d. Maintenar	nce, repair, and upkeep expenses	20d. \$	0.00
20e. Homeown	er's association or condominium dues	20e. \$	0.00
. Other: Specify:		21. +\$	0.00
Onlawlete			
•	monthly expenses	· •	4 770 00
22a. Add lines 4	0	S =   \$	1,770.00
	2 (monthly expenses for Debtor 2), if any, from Official Form 10		
22c. Add line 22	a and 22b. The result is your monthly expenses.	\$	1,770.00
Calculate vour	monthly net income.		
-	12 (your combined monthly income) from Schedule I.	23a. \$	3,431.21
	monthly expenses from line 22c above.	23b\$	1,770.00
	,		1,110.00
23c. Subtract v	our monthly expenses from your monthly income.		/
	is your monthly net income.	23c. \$	1,661.21
For example, do you modification to the	an increase or decrease in your expenses within the year as but expect to finish paying for your car loan within the year or do you expeterms of your mortgage?		n increase or decrease because of a
■ No.	<b>-</b>		
☐ Yes.	Explain here: Excess on J is exempt social security		

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Debtor 1	Carole Haire Cole	eman		
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF SOUTH	CAROLINA	
	22-00297			
(if known)				Check if this is an amended filing
Official Fori	m 106Dec			
		ın Individual	Debtor's Schedules	12/15

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

	Sign Below		
Die	d you pay or agree to pay someone who is NOT an attorney	to help you fill out bankruptcy forms?	
	No		
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)	
tha	der penalty of perjury, I declare that I have read the summar t they are true and correct.		
Х	70, 04,010 114110 001011411	Signature of Debtor 2	
	Carole Haire Coleman Signature of Debtor 1	Signature of Debtor 2	
	Date March 1, 2022	Date	

Official Form 106Dec

Fill	l in this info	ormation to identify yo	ur case:			
De	btor 1	Carole Haire Co	oleman			
		First Name	Middle Name	Last Name		
	btor 2 ouse if, filing)	First Name	Middle Name	Last Name		
Uni	ited States	Bankruptcy Court for the	E DISTRICT OF SOUTH	CAROLINA		
1	se number	22-00297				☐ Check if this is an amended filing
St	atemer	e and accurate as pos		e are filing together, both	are equally responsible fo	
		own). Answer every qu		to this form. On the top o	f any additional pages, wri	te your name and case
Pa	rt 1: Giv	e Details About Your N	larital Status and Where Y	ou Lived Before		
1.	What is y	our current marital sta	tus?			
	☐ Marri	ed				
	■ Not n	narried				
2.	During th	e last 3 years, have yo	u lived anywhere other tha	in where you live now?		
	■ No					
	☐ Yes.	List all of the places you	lived in the last 3 years. Do	not include where you live	e now.	
	Debtor 1	Prior Address:	Dates Debtor lived there	Debtor 2 Price	or Address:	Dates Debtor 2 lived there
3. state					munity property state or te	rritory? (Community property and Wisconsin.)
	■ No □ Yes.	Make sure you fill out So	chedule H: Your Codebtors	(Official Form 106H).		
Pai	rt 2 Exp	lain the Sources of Yo	ur Income			
4.	Fill in the t	otal amount of income y	employment or from opera rou received from all jobs an u have income that you rece	d all businesses, including		s calendar years?
	■ No □ Yes.	Fill in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions at exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)

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Debtor 1 Carole Haire Coleman Case number (if known) 22-00297

5.	Did you receive any	other	in	come	during	this y	year	or the	two	previo	us	calendar	years?

Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

No
Yes. Fill in the details.

	Debtor 1		Debtor 2	
	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	PEBA	\$1,755.59		
	Pension	\$1,391.58		
	Social Security Benefits	\$22,239.60		
For last calendar year: (January 1 to December 31, 2021)	PEBA	\$10,553.34		
	Pension	\$16,699.00		
	Social Security Benefits	\$22,239.60		
For the calendar year before that: (January 1 to December 31, 2020)	PEBA	\$10,429.26		
	Pension	\$16,534.00		
	Social Security Benefits	\$22,239.60		

### Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

6.	Are either	Debtor 1	s or Deb	otor 2's	debts p	orimarily	consumer	debts
----	------------	----------	----------	----------	---------	-----------	----------	-------

No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of 6,825 or more?

☐ No. Go to line 7.

☐ Yes List below each creditor to whom you paid a total of \$6,825\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

#### Yes. **Debtor 1 or Debtor 2 or both have primarily consumer debts.**

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

☐ No. Go to line 7.

Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for
-----------------------------	------------------	-------------------	----------------------	----------------------

<sup>\*</sup> Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.

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Debtor 1 Carole Haire Coleman Case number (if known) 22-00297

	Dates of payment	Total amount paid	Amount you still owe	Was this payment for
OneMain Financial Attn: Bankruptcy Po Box 3251 Evansville, IN 47731	November, December, January @ 442/mo	\$1,326.00	\$12,301.00	<ul> <li>☐ Mortgage</li> <li>☐ Car</li> <li>☐ Credit Card</li> <li>☐ Loan Repayment</li> <li>☐ Suppliers or vendors</li> <li>☐ Other</li> </ul>
Founders Federal CU Attn: Bankruptcy 737 Plantation Rd Lancaster, SC 29720	Nov, Dec, Jan	\$561.00	\$3,401.00	☐ Mortgage ☐ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ■ Other_
Sunbelt Credit Attn: Bankruptcy 208 East Main Street Spartanburg, SC 28306	Dec	\$120.00	\$480.00	☐ Mortgage ☐ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other
Within 1 year before you filed for bankru Insiders include your relatives; any general	partners; relatives of any gen	ent on a debt you o	owed anyone who erships of which yo	was an insider?
of which you are an officer, director, person a business you operate as a sole proprietor alimony.  No			g securities; and a	ny managing agent, including one
a business you operate as a sole proprietor alimony.			g securities; and a	ny managing agent, including one
a business you operate as a sole proprietor alimony.  No Yes. List all payments to an insider. Insider's Name and Address  Within 1 year before you filed for bankruinsider? Include payments on debts guaranteed or o	Dates of payment ptcy, did you make any pay	yments for domestic  Total amount paid	g securities; and a support obligation  Amount you  still owe	ny managing agent, including one is, such as child support and  Reason for this payment
a business you operate as a sole proprietor alimony.  No Yes. List all payments to an insider. Insider's Name and Address  Within 1 year before you filed for bankruinsider? Include payments on debts guaranteed or o	Dates of payment ptcy, did you make any pay	Total amount paid	g securities; and a support obligation  Amount you  still owe	ny managing agent, including one is, such as child support and  Reason for this payment
a business you operate as a sole proprietor alimony.  No Yes. List all payments to an insider. Insider's Name and Address  Within 1 year before you filed for bankruinsider? Include payments on debts guaranteed or of the No Yes. List all payments to an insider	Dates of payment  ptcy, did you make any pay cosigned by an insider.  Dates of payment	Total amount paid	g securities; and a support obligation  Amount you still owe any property on a	ny managing agent, including one is, such as child support and  Reason for this payment  ccount of a debt that benefited a
a business you operate as a sole proprietor alimony.  No Yes. List all payments to an insider. Insider's Name and Address  Within 1 year before you filed for bankruinsider? Include payments on debts guaranteed or of the No Yes. List all payments to an insider Insider's Name and Address	Dates of payment  ptcy, did you make any pay cosigned by an insider.  Dates of payment  ions, and Foreclosures  ptcy, were you a party in ar	Total amount paid ments or transfer a	Amount you still owe any property on a Amount you still owe any property on a still owe	ny managing agent, including one is, such as child support and  Reason for this payment  ccount of a debt that benefited a  Reason for this payment Include creditor's name
a business you operate as a sole proprietor alimony.  No Yes. List all payments to an insider. Insider's Name and Address  Within 1 year before you filed for bankruinsider? Include payments on debts guaranteed or one of the payments to an insider.  No Yes. List all payments to an insider. Insider's Name and Address  Identify Legal Actions, Repossess Within 1 year before you filed for bankruinst all such matters, including personal injutice.	Dates of payment  ptcy, did you make any pay cosigned by an insider.  Dates of payment  ions, and Foreclosures  ptcy, were you a party in ar	Total amount paid ments or transfer a	Amount you still owe any property on a Amount you still owe any property on a still owe	ny managing agent, including one is, such as child support and  Reason for this payment  ccount of a debt that benefited a  Reason for this payment Include creditor's name
a business you operate as a sole proprietor alimony.  No Yes. List all payments to an insider. Insider's Name and Address  Within 1 year before you filed for bankruinsider? Include payments on debts guaranteed or one of the payments on the payments to an insider.  No Yes. List all payments to an insider. Insider's Name and Address  Identify Legal Actions, Repossess.  Within 1 year before you filed for bankruinst all such matters, including personal injumodifications, and contract disputes.	Dates of payment  ptcy, did you make any pay cosigned by an insider.  Dates of payment  ions, and Foreclosures  ptcy, were you a party in ar	Total amount paid ments or transfer a	Amount you still owe  Amount you still owe  Amount you still owe  any property on a	ny managing agent, including one is, such as child support and  Reason for this payment  ccount of a debt that benefited a  Reason for this payment Include creditor's name

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Page 35 of 48 Document Debtor 1 Carole Haire Coleman Case number (if known) Case title Status of the case Nature of the case Court or agency Case number Carole H Coleman vs. Maverick **Action to rescind** York County Common Pending Venture Group East Llc, et al deed, recovery of Pleas □ On appeal 2020CP4603338 damages and □ Concluded attorney fees 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. ☐ Yes. Fill in the information below **Creditor Name and Address Describe the Property** Date Value of the property Explain what happened 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? П Yes. Fill in the details. Date action was **Creditor Name and Address** Describe the action the creditor took Amount taken Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No ☐ Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value the gifts per person Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? No Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value contributed more than \$600 **Charity's Name** Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

No

☐ Yes. Fill in the details.

Describe the property you lost and Describe any insurance coverage for the loss how the loss occurred Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.

Date of your loss

Value of property lost Case 22-00297-hb Doc 15 Filed 03/03/22 Entered 03/03/22 14:46:06 Desc Main Document Page 36 of 48

Debtor 1 Carole Haire Coleman

Case number (if known) 22-00297

Pai	t 7: List Certain Payments or Transfers								
16.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?  Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.								
	□ No								
	_ 110								
	— 100.1 iii iii tile detaile.								
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You		Description and value of any property transferred		ty	Date payment or transfer was made	Amount o paymen		
	Gaffney Law Firm, P.A. P.O. Box 3966 West Columbia, SC 29171-3966 david@gaffneylawfirm.com		\$313 filing fee; atty fee	\$37 credit report	; \$250	Feb 22	\$600.00		
	Allen Credit and Debt Counseling Agency		credit counseli	ng		feb 22	\$37.00		
17.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?  Do not include any payment or transfer that you listed on line 16.								
	No No								
	Yes. Fill in the details.								
	Person Who Was Paid Address		Description and v transferred	alue of any proper	ty	Date payment or transfer was made	Amount o paymen		
18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?  Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.  No								
	☐ Yes. Fill in the details.								
	Person Who Received Transfer Address					nny property or received or debts	Date transfer was made		
	Person's relationship to you				paid in exercise				
19.	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)  No  Yes. Fill in the details.								
	Name of trust Description and value of the property transferred				ed	Date Transfer was made			
Pai	t 8: List of Certain Financial Accounts, I	nstrume	ents, Safe Deposi	t Boxes, and Stora	ge Units				
20.	Within 1 year before you filed for bankrupt sold, moved, or transferred? Include checking, savings, money market, houses, pension funds, cooperatives, assolution No  Yes. Fill in the details.	or othe	er financial accou	nts; certificates of		•			
		1.004	4 digits of	Type of account	or Det	o account was	l oot holene		
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)		4 digits of unt number	Type of account instrument	clo mo	e account was sed, sold, ved, or asferred	Last balance before closing o transfe		

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Debtor 1 Carole Haire Coleman Case number (if known) 22-00297

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for secucash, or other valuables?							
	■ No						
	Yes. Fill in the details.						
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?			
22.	Have you stored property in a storage unit or	place other than your home within 1	year before you filed for bankruptcy	?			
	No						
	Yes. Fill in the details.						
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?			
Par	t 9: Identify Property You Hold or Control fo	r Someone Else					
23.	Do you hold or control any property that some for someone.	eone else owns? Include any proper	rty you borrowed from, are storing for	r, or hold in trust			
	■ No						
	☐ Yes. Fill in the details.						
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value			
Par	t 10: Give Details About Environmental Inform	mation					
For	the purpose of Part 10, the following definition	s apply:					
	Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.						
	Site means any location, facility, or property a to own, operate, or utilize it, including disposa		law, whether you now own, operate,	or utilize it or used			
	Hazardous material means anything an enviro hazardous material, pollutant, contaminant, or		s waste, hazardous substance, toxic s	substance,			
Rep	ort all notices, releases, and proceedings that	you know about, regardless of whe	n they occurred.				
24.	Has any governmental unit notified you that yo	ou may be liable or potentially liable	under or in violation of an environme	ental law?			
	■ No						
	☐ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice			
25.	Have you notified any governmental unit of an	y release of hazardous material?					
	■ No □ Yes. Fill in the details.						
		0		Data of "			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice			

Case 22-00297-hb Doc 15 Filed 03/03/22 Entered 03/03/22 14:46:06 Desc Main Page 38 of 48 Document Debtor 1 Carole Haire Coleman Case number (if known) 22-00297 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Nο Yes. Fill in the details. **Case Title** Court or agency Nature of the case Status of the **Case Number** Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number** Address Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name **Date Issued Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Carole Haire Coleman Carole Haire Coleman Signature of Debtor 2 Signature of Debtor 1 Date March 1, 2022 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes

☐ Yes. Name of Person

. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

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Fill in this information to identify your case:						
Debtor 1	Carole Haire Coleman					
Debtor 2 (Spouse, if filing)						
United States Bankruptcy Court for the: District of South Carolina						
Case number (if known)	22-00297					

Check as directed in lines 17 and 21:								
	According to the calculations required by this Statement:							
<ol> <li>Disposable income is not determined u 11 U.S.C. § 1325(b)(3).</li> </ol>								
	Disposable income is determined under 11 U.S.C. § 1325(b)(3).							
3. The commitment period is 3 years.								
	4. The commitment period is 5 years.							

☐ Check if this is an amended filing

### Official Form 122C-1

# **Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period**

04/20

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1:	Calculate Your Average Monthly Income
1. <b>Wh</b>	at is your marital and filing status? Check one only.
<b>=</b> 1	Not married. Fill out Column A, lines 2-11.

☐ Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

spouses own the same rental property, put the income from that	property in one colu	illii Olliy. II you ii	ave nothing to i	eport ior	arry line, write 50 in the sp
			Column A Debtor 1		Column B Debtor 2 or non-filing spouse
<ol><li>Your gross wages, salary, tips, bonuses, overtime, payroll deductions).</li></ol>	, and commissio	ns (before all	\$	0.00	\$
<ol> <li>Alimony and maintenance payments. Do not include Column B is filled in.</li> </ol>	e payments from a	a spouse if	\$	0.00	\$
4. All amounts from any source which are regularly p of you or your dependents, including child support from an unmarried partner, members of your househol and roommates. Do not include payments from a spou you listed on line 3.	<b>t.</b> Include regular ld, your dependen	contributions its, parents,	\$	0.00	\$
5. Net income from operating a business, profession, or farm	Debtor 1				
Gross receipts (before all deductions)	\$0.00				
Ordinary and necessary operating expenses	-\$0.00				
Net monthly income from a business, profession, or far	rm \$ <b>0.00</b>	Copy here ->	\$	0.00	\$
6. Net income from rental and other real property	Debtor 1				
Gross receipts (before all deductions) \$	400	0.00			
Ordinary and necessary operating expenses -\$		0.00			
Net monthly income from rental or other real property \$	400	Copy 0.00 here -> :	\$40	00.00	\$

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

ebtor 1	Carole Haire Coleman		Case nur	mber ( <i>if knov</i>	(n) <b>22-0029</b>	7	
			Column Debtor		Column E Debtor 2 non-filin		
7. Int	erest, dividends, and royalties		\$	0.0	0 \$		
	nemployment compensation		\$	0.0	 0		•
	onot enter the amount if you contend that the amount received was a benefit use Social Security Act. Instead, list it here:	ınder					-
	For you\$ <b>0.00</b>						
ı	For your spouse \$	_					
9. <b>Pe</b> bei not Un dis pay	nsion or retirement income. Do not include any amount received that was a nefit under the Social Security Act. Also, except as stated in the next sentence t include any compensation, pension, pay, annuity, or allowance paid by the lited States Government in connection with a disability, combat-related injury of sability, or death of a member of the uniformed services. If you received any received any received and under chapter 61 of title 10, then include that pay only to the extent that es not exceed the amount of retired pay to which you would otherwise be entired under any provision of title 10 other than chapter 61 of that title.	e, do or etired t it	\$	2,145.9	<b>6</b> \$		
Do und cor crir cor Go dea	come from all other sources not listed above. Specify the source and amount include any benefits received under the Social Security Act; payments maker the Federal law relating to the national emergency declared by the Presidder the National Emergencies Act (50 U.S.C. 1601 et seq.) with respect to the ronavirus disease 2019 (COVID-19); payments received as a victim of a warme, a crime against humanity, or international or domestic terrorism; or impensation, pension, pay, annuity, or allowance paid by the United States overnment in connection with a disability, combat-related injury or disability, or ath of a member of the uniformed services. If necessary, list other sources on parate page and put the total below.	ade ent					
			\$	0.0	0 \$		
		_	\$	0.0			
	Total amounts from separate pages, if any.	+	\$	0.0			-
ead	Ilculate your total average monthly income. Add lines 2 through 10 for ch column. Then add the total for Column A to the total for Column B.  Determine How to Measure Your Deductions from Income		2,545.96	<b>5</b> +\$			2,545.96  otal average onthly income
art 2:	Determine now to Measure Your Deductions from Income						
	ppy your total average monthly income from line 11					. \$	2,545.96
	You are not married. Fill in 0 below.						
	You are married and your spouse is filing with you. Fill in 0 below.						
	You are married and your spouse is not filing with you.						
	Fill in the amount of the income listed in line 11, Column B, that was NOT redependents, such as payment of the spouse's tax liability or the spouse's s						
	Below, specify the basis for excluding this income and the amount of incom adjustments on a separate page.	e dev	oted to ea	ach purpo	ose. If necessa	ry, list add	itional
	If this adjustment does not apply, enter 0 below.	_					
		\$					
		\$					
		<u> —</u>					
	Total\$	;	(	0.00	Copy here=>		0.00
14. <b>Y</b>	our current monthly income. Subtract line 13 from line 12.					\$	2,545.96
15. <b>C</b>	alculate your current monthly income for the year. Follow these steps:						
	5a Conviline 14 here=>					¢	2,545.96

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Debtor 1	Carole Haire Coleman	Case number (if known)	22-00297	
	Multiply line 15a by 12 (the number of months in a year).		X	12
15	o. The result is your current monthly income for the year for this pa	ırt of the form	\$	30,551.52

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

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**Carole Haire Coleman** Debtor 1 Case number (if known) 22-00297 16. Calculate the median family income that applies to you. Follow these steps: 16a. Fill in the state in which you live. 1 16b. Fill in the number of people in your household. 49,999.00 16c. Fill in the median family income for your state and size of household. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 17. How do the lines compare? Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, Disposable income is not determined under 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Your Disposable Income (Official Form 122C-2). 17b Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, Disposable income is determined under 11 U.S.C. § 1325(b)(3). Go to Part 3 and fill out Calculation of Your Disposable Income (Official Form 122C-2). On line 39 of that form, copy your current monthly income from line 14 above. Part 3: Calculate Your Commitment Period Under 11 U.S.C. § 1325(b)(4) 18. Copy your total average monthly income from line 11. \$ 2,545.96 19. Deduct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13. 0.00 19a. If the marital adjustment does not apply, fill in 0 on line 19a. \$ 2,545.96 19b. Subtract line 19a from line 18. 20. Calculate your current monthly income for the year. Follow these steps: 2,545.96 20a. Copy line 19b Multiply by 12 (the number of months in a year). x 12 30,551.52 \$ 20b. The result is your current monthly income for the year for this part of the form 49,999.00 20c. Copy the median family income for your state and size of household from line 16c 21. How do the lines compare? Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, The commitment period is 3 years. Go to Part 4. Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, The commitment period is 5 years. Go to Part 4. Part 4: Sign Below By signing here, under penalty of perjury I declare that the information on this statement and in any attachments is true and correct. X /s/ Carole Haire Coleman **Carole Haire Coleman** Signature of Debtor 1 Date March 1, 2022

If you checked 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

MM / DD / YYYY

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Debtor 1 Carole Haire Coleman Case number (if known) 22-00297

### **Current Monthly Income Details for the Debtor**

#### **Debtor Income Details:**

Income for the Period 08/01/2021 to 01/31/2022.

Line 6 - Rent and other real property income

Source of Income: Rental income - 201 Old Simpson PI

Income/Expense/Net by Month:

	Date	Income	Expense	Net
6 Months Ago:	08/2021	\$800.00	\$0.00	\$800.00
5 Months Ago:	09/2021	\$800.00	\$0.00	\$800.00
4 Months Ago:	10/2021	\$800.00	\$0.00	\$800.00
3 Months Ago:	11/2021	\$0.00	\$0.00	\$0.00
2 Months Ago:	12/2021	\$0.00	\$0.00	\$0.00
Last Month:	01/2022	\$0.00	\$0.00	\$0.00
	Average per month:	\$400.00	\$0.00	
			Average Monthly NET Income:	\$400.00

Line 9 - Pension and retirement income

Source of Income: S.C. Pol Off Retire - late husband

Constant income of \$1,345.96 per month.

Line 9 - Pension and retirement income Source of Income: S.C. State retirement Constant income of \$800.00 per month.

Non-CMI - Social Security Act Income Source of Income: Social Security Constant income of \$1,853.00 per month.

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter	7:	Liquidation
(	\$245	filing fee
	\$78	administrative fee
<u>+</u>	\$15	trustee surcharge
9	\$338	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

\$571 administrative fee

\$1,738 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$78	administrative fee
<u> </u>	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$78	administrative fee
	\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/forms/bankruptcy-forms

### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses">http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses</a>.

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/services-forms/bankruptcy/cre">http://www.uscourts.gov/services-forms/bankruptcy/cre</a> dit-counseling-and-debtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

### LOCAL OFFICIAL FORM 1007-1(b) TO SC LBR 1007-1

### **United States Bankruptcy Court District of South Carolina**

In re	Carole Haire Coleman		Case No.	22-00297
		Debtor(s)	Chapter	13

### **CERTIFICATION VERIFYING CREDITOR MATRIX**

The above named debtor, or attorney for the debtor if applicable, hereby certifies pursuant to South Carolina Local Bankruntev Rule 1007-1 that the master mailing list of creditors submitted either on computer diskette, electronically filed via identical ir form.

CM/EC	F, or conventionally filed in a typed hard	d copy scannable format which has been compared to, and contains d lists which are being filed at this time or as they currently exist in draft
	Master mailing list of creditors submitted v	ia:
	(a) computer diskette	
	(b) scannable hard copy (number of sheets submitted	
	(c) X electronic version file	d via CM/ECF
Date:	March 1, 2022	/s/ Carole Haire Coleman
		Carole Haire Coleman
		Signature of Debtor
Date:	March 1, 2022	/s/ David C. Gaffney
		Signature of Attorney
		David C. Gaffney 10112
		Gaffney Law Firm, P.A.
		P.O. Box 3966
		West Columbia, SC 29171-3966
		803-781-0500 Fax: 803-454-9900
		Typed/Printed Name/Address/Telephone
		10112 SC
		District Court I.D. Number